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Complete if Known Substitute for form 1449/PTO **Application Number** Filing Date INFORMATION DISCLOSURE First Named Inventor **Foust** STATEMENT BY APPLICANT Art Unit 366 (Use as many sheets as necessary) Examiner Name FOU002USPT02 Sheet 1 of 1 Attorney Docket Number

| · · ·                 |              |   | U. S. PATEN                                      | DOCUMENTS  |   |
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